

Wound closure glue and wound care

What is wound closure glue?

Wound closure glue is a special medical adhesive that holds skin edges together as the body heals the wound underneath. It is not placed *into* the wound. The glue is a safe and effective method to close selected wounds. When a doctor assesses your wound they will look for features that are predictive of healing well with the application of the glue to close the wound.

Not all wounds are suitable for glue – some wounds are too long or deep, have ragged damaged edges or are in a position where the wound edges will be under the stress of movement or prone to bleeding underneath. Wounds caused by animal bites are not often suitable for glue, as they have a high rate of infection – instead they are cleaned thoroughly and treated with antibiotics and dressings.

There are some advantages to closing a wound where gluing is suitable – the glue causes only minimal discomfort when applied, and it is a rapid procedure. The cosmetic outcome is comparable to sutures, and there is no need to return to medical care for removal of sutures or new dressings.

Will I have a scar?

All wounds leave a scar. At first, the scar will be red and thick, then over the next six months it will become white, thin and smaller (sometimes almost invisible). The skin heals at different rates, depending on factors such as the person's general health, age, diet and whether the wound becomes infected.

The first week with glue

In the first few days after wound care the wound may be slightly red, tender or swollen. This is the same for all wounds including those managed with dressings or sutures. These symptoms should settle and resolve as the wound starts to heal. During this time, you may need some pain relief (such as paracetamol) and to rest the wound area when possible.

Where the glue has been applied to the skin, the surface may take on an irregular, crinkled appearance. This is quite normal and will not affect the function of the adhesive.

Keep the wound clean and dry for the first 48 hours. After this the area can get briefly wet in the shower but avoid swimming or

soaking in the bath for seven days - just pat dry if it gets wet. The adhesive will start to come away from the skin of its own accord within ten days. By this time the wound underneath should be sufficiently healed so that further coverings are not required. The glue may take up to three weeks to completely fall off your wound.

Do not pull or pick at the glue, and avoid combing hair around the wound or creating tension on the wound.

A bandage can be used to protect the wound if it is at risk of becoming wet or dirty. It is important that this cover does not stick to the glue and pull the glue off the wound when it is removed. Do not use creams or ointments over the glue. This may cause the glue to soften and come off too early, risking the wound re-opening.

All wounds have a small risk of infection. The use of glue does not change or increase this risk compared to other methods of wound closure. When a wound is closed with glue there is a risk of the wound re-opening, called dehiscence. Studies have shown this happens in 4% of wounds closed with glue compared to 1-2% of wounds closed with sutures. If your wound does re-open please return to Cabrini ED for further wound management.

Optimising wound healing after gluing

- First follow the directions above regarding initial wound care.
- Wounds increase in strength over a six week period post injury. You may be advised to support the wound further with strips or medical tape for a further period of time after the glue comes off, particularly if the injury is over a joint, in an area prone to tension, or you are an active sports person.
- As the wound heals it is important to avoid early sun exposure as this will potentially darken the scar permanently. Use sunscreen on the wound over the sunny months for at least a year. If you are unhappy with your wound healing and how the scar appears please return to Cabrini ED to discuss options for further treatment.
- After one to two years, the wound will take on its final appearance. If you find it cosmetically unacceptable, there may be the option of 'scar revision'. This is undertaken by a plastic surgeon.

Follow up

Some wounds will need to be reviewed by a doctor. Your emergency doctor will let you know if this is necessary and when. If you have concerns at any time about your wound please return to Cabrini ED even if you do not have an appointment.

If becoming infected, signs usually start developing two to three days after the injury and may include:

- Increasing pain despite taking painkillers
- A warm, red, and swollen or painful wound or surrounding skin
- Pus (yellow or greenish discharge) or an offensive smell
- A tender lump in the groin or armpit
- Fever (temperature over 37.5°C in adults or 38°C in children) or flu-like symptoms
- The wound is not healing (after about five days).

Seeking help

Cabrini Emergency Department (ED) is staffed by experienced emergency doctors and nurses 24 hours a day, 7 days per week. If you have any questions about your ED treatment our qualified ED staff can be contacted on **(03) 9508 1500** at any time. If you need to return to Cabrini ED for ongoing care we would be glad to take care of you again and if this occurs within a week of your initial consultation the doctor's fee will be bulk-billed.

You can also expect to receive a phone call or SMS message from one of our emergency nurses the day after you have been discharged. The nurse will be able to clarify any aspect of your diagnosis, treatment, or follow-up.

In a medical emergency return to Cabrini ED if it is safe to do so or go to the nearest hospital emergency department or call an ambulance – dial triple zero (000).

Want to know more?

- Contact Cabrini ED on **(03) 9508 1500**
- Ask your local doctor or healthcare professional
- Visit the Better Health Channel at www.betterhealth.vic.gov.au